



Cascade County Home Occupation Permit Application

Cascade County Public Works Department
Planning Division
121 4th St No, STE 2H/I, Great Falls MT 59401
Phone: 406-454-6905 Fax: 406-454-6919

**Site Plan
Requirements
On Back**

\$50.00 Non Refundable Application Fee

Payment: Check (#) _____ Cash _____

OFFICE USE ONLY

Date Application Received: _____	Floodplain Permit (Attached): _____	(Y / N / N/A)
Application No.: _____	Variance Approval (Attached): _____	(Y / N / N/A)
	County Approach Permit (Attached): _____	(Y / N / N/A)
	Health Dept. Approval (Attached): _____	(Y / N / N/A)
Approved Permit No.: _____	Addressing Approval (Attached): _____	(Y / N / N/A)
Date of Final Approval: _____	Approved by (Staff): _____	

Applicant/Agent: _____ **Mailing Address:** _____

Home Phone: _____ Work Phone: _____ **Cell Phone:** _____

Owner(s) if different from applicant: _____ **Mailing Address:** _____

Home Phone: _____ Work Phone: _____ **Cell Phone:** _____

Property Address: _____ Sec _____ T _____ R _____

Lot(s) _____ Blk _____ **Geo Code:** _____ **Parcel #** _____

Home Occupation Requested: _____ **Current Zoning:** _____

INSTRUCTIONS:

The Permit Application Form shall be submitted to the Cascade County Planning Office for review. The applicant shall obtain all required permits/forms:

- If your property is in a regulated floodplain, a Floodplain Permit must be obtained first from the Planning Office.
- If an approach to the property is from a county road, an Approach Permit is needed from the County Road Division.
- If your property needs an address assigned to it, you must obtain one from the GIS Division of Cascade County's Public Works Department.
- If the project involves septic tank approval, permits are available from the City/County Health Department (<http://www.cchdmt.org/environmental-health/>).
- All projects that disturb an acre or more are required to have a "General Permit for Storm Water Discharges Associated with Construction Activity" from the MT Department of Environmental Quality (<http://www.deq.mt.gov/wqinfo/mpdes/stormwaterconstruction.mcp>).

SITE PLAN REQUIREMENTS: (PERMITS WILL NOT BE ISSUED WITHOUT AN ACCURATE SITE PLAN)

Provide a complete site plan at a suitable scale (1" = 40', 1" = 100', etc) which includes the following, as applicable:

Required	Obtained	
<input type="checkbox"/>	<input type="checkbox"/>	1. The location of existing structures, boundaries, drainfields and utilities; include size, dimensions and current uses
<input type="checkbox"/>	<input type="checkbox"/>	2. Location of proposed structures, alterations, curb cuts, access points and utilities and the size, dimensions and uses thereof
<input type="checkbox"/>	<input type="checkbox"/>	3. Existing land use(s) on adjacent property
<input type="checkbox"/>	<input type="checkbox"/>	4. Disturbing one (1) acre or more; if yes, attach DEQ "General Permit for Storm Water Discharges Associated with Construction Activity".
<input type="checkbox"/>	<input type="checkbox"/>	5. Location, size, dimensions and number of off-street parking spaces, including on-site vehicular driveways and type of surface improvements (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	6. Location and type of existing and proposed landscaping or buffering (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	7. Location, type and height of existing and proposed fencing and/or screening (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	8. Location, type and height of sight-obscuring improvement surrounding areas of storage for raw materials, finished products, machinery and equipment (if applicable)
<input type="checkbox"/>	<input type="checkbox"/>	9. Industrial Affidavit (if applicable)

ATTEST: I hereby certify that the information given herein is true and correct to the best of my knowledge. There are no restrictions placed upon my property which would prohibit the issuance of this permit. If there are any restrictions, then this permit shall become null and void. I hereby grant permission to any Cascade County Zoning Official to enter my property to inspect for compliance with the County Zoning Regulations in relation to this application.

Signature of Applicant: _____ **Date:** _____

Signature of Property Owner: _____ **Date:** _____